1. CIR./DIST./DIV. CODE ALM					voucher number (% 031,300/026				
3. MAG. DKT./DEF. NUMBER 2:06-000010-001		4. DIST. DKT./DEF. NUMBER 2:06-000071-001		5. APPEALS DKT./DEF. NUMBER		6. OTHER DKT. NUMBER			
7. IN CASE/MATTER OF (Case Name)		8. PAYMENT CATEGORY		9. TYPE PERSON REPRESENTED		red .	10. REPRESENTATION TYPE (See Instructions)		
U.S. v. Willis		Felony		Adult Defendant			Criminal Case		
11. OFFENSE(S) CHARGED (Cite U.S. Code, Title & Section) If more than one offense, list (up to five) major offenses charged, according to severity of offense. 1) 18 1512A.F TAMPE R W/WITNESS, VICTIM, INFORMANT (IF DEATH RESULTS)									
REQUEST AND AUTHORIZATION FOR TRANSCRIPT 12. PROCEEDING IN WHICH TRANSCRIPT IS TO BE USED (Describe briefly)									
Appeal	WHICH TRANSC	KIPI IS TO BI	E USED (Describe br	ielly)					
13. PRO CEEDING TO BE TRANSCRIBED (Describe specifically). NOTE: The trial transcripts are not to include prosecution opening statement, defense opening statement, prosecution argument, defense argument, prosecution rebuttal, voir dire or jury instructions, unless specifically authorized by the Court (see Item 14).									
2/28/07 Motion to Withdraw Hearing									
14. SP ECIAL AUTHORIZATIONS (Services Other Than Ordinary)								Judge's Initials	
A. Apportioned Cost % of transcript with (Give case name and defendant)									
B. □ 14-Day □	Expedited	☐ Daily	☐ Hourly ☐	Real Time Unedited					
C. Prosecution Opening Statement Prosecution Argument Prosecution Rebuttal Defense Opening Statement Defense Argument Voir Dire Dury Instructions									
D. In this multi-defendant case, commercial duplication of transcripts will impede the delivery of accelerated transcript services									
to persons proceeding under the Criminal Justice Act. 15. ATTORNEY'S STATEMENT 16. COURT ORDER									
As the attorney for the person represented who is named above, I hereby affirm that the transcript requested is necessary for adequate representation. I, therefore, request authorization to obtain the transcript services at the expense of the United States pursuant to the Criminal Justice Apr. The person represented having been established to the court's satisfaction, the authorization requested in Item 15 is hereby granted.									
(strothy Holson 2-22-08 delle while									
Signature of Artorney Date Signature of Presiding Judicia Officer or By Order of the Court									
1/Worky CX44187W2 3/24/08 Printed Name Date of Order Nunc Pro Tunc Date Telephone Number: 331272 9524								e '	
Telephone Number: 37 7 2 7 2 7 2 7 2 7 2 7 2 7 2 7 2 7 2									
CLAIM FOR SERVICES 17. COURT REPORTER/TRANSCRIBER STATUS 18. PAYEE'S NAME (First Name, M.I., Last Name, including any suffix.)									
L'Official Contract Transcriber Other AND MAILING ADDRESS MITCHELL RECORDED AND MAILING ADDRESS							FISNER		
LOVER field Rd.									
843-4	HOPE HULL, AL 360 4 3 Telephone Number: 265-2500								
20. TRANSCRIPT		Include ge Numbers	No. of Pages	Rate Per Page	Sub-Tot	al	Less Amount Apportioned	Total	
Original			7	#3.65				25.55	
Сору					<u> </u>				
Expenses (itemize):									
TOTAL AMOUNT CLAIMED: #								25.55	
21. CLAIMANT'S CERTIFICATION OF SER VICE PROVIDED I hereby certify that the above claim is for services rendered and is correct, and that I have not sought or received payment (compensation or anything of value) from any									
other source for these services.									
Signature of Claimant/Payer Late: 3-11-08									
ATTORNEY CERTIFICATION 2.3									
22. CERTIFICATION OF ATTORNEY OR CLERK I hereby certify that the services were rendered and that the transcript was received.									
Signature of Apromey of Clerk Date									
APPROVED FOR PAYMENT - COURT USE ONLY									
23. APPROVED FOR PAYMENT APPROVED									
Take pl			_	11 MARCH	4 2008	}		# n =	